



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
WIC AND NUTRITION SERVICES
WIC PROOF OF ELIGIBILITY

ASSESSMENT DATE: _____ RECERT DATE: _____

APPLICANT/PARTICIPANT TO FILL IN GRAY AREA ONLY		CATEGORICALLY ELIGIBLE	PHYSICALLY PRESENT							FOLLOW-UP				
FAMILY/ECONOMIC UNIT LIST ALL (FIRST AND LAST NAME)	AGE	CE	PP	PROOF OF ADJUNCT ELIGIBILITY			PROOF OF INCOME (PIN)	GROSS INCOME	PROOF OF IDENTITY (PID)	PROOF OF RESIDENCY (PRE)	30-DAY			30-DAY FOLLOW-UP DATE
				FS	TANF	M		(CHECK ONE) <input type="checkbox"/> W <input type="checkbox"/> M <input type="checkbox"/> A			PIN	PID	PRE	
		<input type="checkbox"/>	<input type="checkbox"/>											
		<input type="checkbox"/>	<input type="checkbox"/>											
		<input type="checkbox"/>	<input type="checkbox"/>											
		<input type="checkbox"/>	<input type="checkbox"/>											
		<input type="checkbox"/>	<input type="checkbox"/>											
		<input type="checkbox"/>	<input type="checkbox"/>											
		<input type="checkbox"/>	<input type="checkbox"/>											
		<input type="checkbox"/>	<input type="checkbox"/>											
ECONOMIC UNIT SIZE	SPECIFY REASONS FOR (NOT PHYSICALLY PRESENT, OTHER INCOME, OTHER IDENTITY)						TOTAL INCOME (CHECK ONE) <input type="checkbox"/> W <input type="checkbox"/> M <input type="checkbox"/> A \$			DOES ADJUNCT ELIGIBILITY APPLY? <input type="checkbox"/> YES <input type="checkbox"/> NO IF NO, IS APPLICANT(S) INCOME ELIGIBLE? <input type="checkbox"/> YES <input type="checkbox"/> NO				
STAFF SIGNATURE(S)										DATE(S)				
PROOF OF ADJUNCT ELIGIBILITY H = HANDS Screens (HDFS/MCII) W = Written Letter/IM Forms C = Call F = FAMIS (Food Stamps/TANF)				PROOF OF INCOME (VERIFICATION) FT = Federal tax forms/W-2, fees and tips ADJ = Adjunct Eligibility - Self Declare CS = Check stubs or copy of check SB = Statement of benefits/Court awarded information/Child Support PC = Signed statement by the employer, if paid in cash OS = Financial information provided to the Immigration and Naturalization Service, for foreign students, resident alien or temporary alien status BS = Copy of bank statement, Interest income O = Other (specify) Q = Questions (Open-Ended)										
PROOF OF ADULT IDENTITY DL = Drivers license ID = ID Card (e.g., state, work, school) P = Passport SR = WIC staff recognition (Allowed at recert only) O = Other (specify)				PROOF OF CHILD/INFANT IDENTITY I = Immunization record BC = Birth Certificate SS = Social Services letter with identifying record SR = WIC staff recognition (Allowed at recert only) R = Hospital or other record O = Other (specify)					PROOF OF RESIDENCY UB = Current utility bill, rent, or mortgage receipt for lodging/housing V = Victim of a disaster, a homeless individual, or a migrant must sign a statement attesting to his/her residency WS = Written statement from reliable third party					